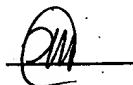


SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/236,947	01/25/99	451	3723	240.988218

APPLICANT

FRANK D. LEHMAN, WILSON, NY.

****CONTINUING DOMESTIC DATA*******
VERIFIED



****371 (NAT'L STAGE) DATA*******
VERIFIED

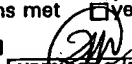


****FOREIGN APPLICATIONS*******
VERIFIED



FOREIGN FILING LICENSE GRANTED 02/10/99

***** SMALL ENTITY *****

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	 Initials	NY	4	16	7

ADDRESS

R CRAIG KAUFFMAN
 SIMPSON SIMPSON & SNYDER
 5554 MAIN STREET
 SUITE 200
 WILLIAMSVILLE NY 14221

TITLE

BALANCER FOR ORBITAL ABRADING MACHINE

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$536		